



CITY OF RIVERSIDE  
APPLICATION FOR EMPLOYMENT  
3780 Market Street | Riverside, California | 92501  
909/826-5808 | FAX 909/826-2552 | TDD 909/826-2515

THE CITY OF RIVERSIDE IS AN EQUAL OPPORTUNITY  
EMPLOYER. We encourage all persons to file applications with us as we do not  
discriminate on the basis of race, color, religion, age, sex, national origin, veteran status,  
or disability.

INSTRUCTIONS TO APPLICANTS: ?

This application is part of the examination process. Before completing this form please read the Minimum Qualifications for the job in which you are interested. Your application will not be considered for the position unless you meet these requirements. Print clearly with ink or use typewriter. Notify us promptly of any change of address and/or telephone number.

Answer all questions completely and accurately. Resume may not substitute.

Show exact title as it appears on job announcement -- Separate applications required for each job.

POSITION APPLIED FOR: Job Code:

SOCIAL SECURITY NUMBER:

NAME

Last

First

Middle

ADDRESS

Street

City

State

Zip

TELEPHONE

Home

Business

AVAILABILITY SCHEDULE:

What hours are you willing to work?

Days

Swing (Evenings)

Nights

Rotating Shift

Flex Schedule

Full time

Part time

Weekends

Temporary

Summer only

Complete only if a driver's license is required for the position:

DO YOU HAVE A DRIVER'S LICENSE? Yes No License #: Class: State Expiration

LIST LANGUAGES OTHER THAN ENGLISH IN WHICH YOU ARE PROFICIENT.

ReadWriteSpeak

YesNo

A. Have you ever been employed by the CITY OF RIVERSIDE? If "yes", give Department and dates employed.

B. Have you ever been convicted of a felony? Conviction does not necessarily disqualify candidates from employment consideration. If yes, list below the date, place, offense, and fine or sentence for each instance.

C. Do you have any relatives working for the City of Riverside? Name Department Relationship

Comments:

Typing/Shorthand speed only if required for the position:

ELEMENTARY AND SECONDARY SCHOOL (CIRCLE HIGHEST LEVEL ATTAINED):

Grade School: 1 2 3 4 5 6 7 8 High School: 9 10 11 12 GED HS Diploma

EDUCATIONAL INSTITUTIONS ATTENDED (Colleges, Technical Schools, etc.) (Check if currently enrolled)	MAJOR SUBJECTS/COURSES	UNITS COMPLETED		DEGREE
		Semester	Quarter	

CURRENT PROFESSIONAL REGISTRATION, LICENSE OR CERTIFICATE NUMBER(S), ETC.

DO YOU MEET THE MINIMUM AGE REQUIREMENT STATED ON THE BULLETIN? Yes No

OFFICE USE ONLY: QUALIFIED NOT QUALIFIED  
Reason: Date: Staff:

This information will be detached from your application and used for research and statistical purposes only.

YOUR NAME: (Last) (First) (M.I.)

SOCIAL SECURITY NO.:

JOB APPLIED FOR: (As printed on bulletin)

APPLICATION DATE: (MO.) (DAY) (YR.)

FOR OFFICE USE ONLY: QUALIFIED NOT QUALIFIED

In order to comply with Federal regulations in the area of Equal Opportunity Employment, employers must have data available on applicant flow patterns (41 CFR 60-2, 12, 60-250.5). For this reason, we would appreciate your voluntary cooperation in providing the following information. This information will be treated confidentially and will not be used to discriminate against any prospective or incumbent employee of the City of Riverside. This information may be provided to government officials investigating our contract compliance status.

SEX: Female Male

AGE GROUP: Under 40 Over 40

How did you hear about this position?

Radio/TV Station: Human Resources Dept.

Newspaper: City Employee

Magazine: Job-Line

Website: Friend/Relative

ETHNIC BACKGROUND: (See reverse side for definition)  
Choose the one (ONLY ONE) ethnic group with which you most closely identify yourself.  
White Hispanic American Indian Other  
Black Asian or Pacific Islander or Alaskan Native

Name Last First M.I.

EXPERIENCE - Please account for all employment within the last ten years, beginning with your current or most recent position. In addition, please indicate any other experience which you feel is relevant to the position for which you are applying (e.g., volunteer experience, military experience, etc.). Resumes are welcomed, but are not acceptable as a replacement for this application. YOU SHOULD ATTACH ADDITIONAL SHEETS IF NECESSARY. Complete all requested information fully.

<div>From        /        /        To        /        /</div> <div>Employer Name and Address:</div> <div></div> <div></div> <div></div> <div>Supervisor Name &amp; Title:</div> <div></div> <div>Telephone: </div>	<div>Job Title: _____ Mo. Salary _____</div> <div>Duties: _____</div> <div></div> <div></div> <div></div> <div></div> <div></div> <div>_____ No. of Hours Worked Per Week _____</div> <div>Reason for Leaving: _____</div>
<div>From        /        /        To        /        /</div> <div>Employer Name and Address:</div> <div></div> <div></div> <div></div> <div>Supervisor Name &amp; Title:</div> <div></div> <div>Telephone: </div>	<div>Job Title: _____ Mo. Salary _____</div> <div>Duties: _____</div> <div></div> <div></div> <div></div> <div></div> <div></div> <div>_____ No. of Hours Worked Per Week _____</div> <div>Reason for Leaving: _____</div>
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MAY WE CONTACT ALL EMPLOYERS LISTED?    Yes    No    If no, indicate exceptions: \_\_\_\_\_

**CERTIFICATE OF APPLICANT:** I certify that all statements made on this application are true and complete to the best of my knowledge. I understand that any false statements may lead to disqualification or dismissal. Please check this box for web certification.

Signature \_\_\_\_\_ Date \_\_\_\_\_

<div><b>ETHNIC ORIGIN DEFINITIONS:</b></div> <div>White (Includes Indo-European, Pakistani, East Indian). Black (Includes African, Jamaican, Trinadian, and West Indian). Hispanic (Includes Mexican, Puerto Rican, Cuban, Latin American or Spanish). Asian or Pacific Islander (Includes Japanese, Chinese, Korean, Vietnamese, Filipino or Samoan). American Indian or Alaskan Native (Includes persons who identify themselves or are know as such by virtue of tribal association). <b>(As prescribed by U.S.C. Title 29, Chapter XIV, Subpart 1, Section 1602.30)</b></div>	<div><b>AS A RESULT OF A DISABILITY WILL YOU NEED TO HAVE ACCOMMODATION IN THE:</b></div> <div><div>Interview/exam process</div><div>Performance of essential functions of the job</div></div> <div><b>If either box is checked, you will be contacted by a staff member who will assist in arranging reasonable accommodation.</b></div>
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